PTO/SB/06 (07-06)

Approved for use through 1/31/2007. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. Department of information under the Proposed Reduction Act of 1005, no persons are required to respend to a collection of information under the proposed Reduction Act of 1005, no persons are required to respend to a collection of information under the proposed Reduction Act of 1005, no persons are required to respend to a collection of information under the proposed Reduction Act of 1005, no persons are required to respend to a collection of information under the proposed Reduction Act of 1005, no persons are required to respend to a collection of information under the proposed Reduction Act of 1005, no persons are required to respect to the persons are required to the person

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/518,056			ing Date 03/2005	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN	
$\vdash$	FOR	I N	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	OR	RATE (\$)	FEE (\$)	
П	BASIC FEE (37 CFR 1.16(a), (b),	-	N/A	LD IN	N/A		N/A	TLE (0)	i	N/A	TLE (6)	
Н	SEARCH FEF	or (c))	N/A		N/A		N/A		ı	N/A		
H	(37 CFR 1.16(k), (i), (ii)		N/A	-	N/A N/A		N/A		ł	N/A		
	(37 CFR 1.16(o), (p), ( FAL CLAIMS	or (q))	minus 20 =				x \$ =		OR	x s =		
IND	CFR 1.16(i)) EPENDENT CLAIM	is	minus 20 = *				x s =		l on	x s =		
(37	CFR 1.16(h))	If the	If the specification and di		drawings exceed 100				ı	- ·		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	ts of pap 50 (\$125 ional 50 s		on size fee due ) for each on thereof. See							
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))								1			
* If	* If the difference in column 1 is less than zero, enter "0" in column 2.								1	TOTAL		
APPLICATION AS AMENDED – PART II  (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY				
AMENDMENT	03/22/2010	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	• 40	Minus	<del></del> 40	= 0	1	X \$26 =	0	OR	x s =		
	Independent (37 CFR 1.16(h))	• 2	Minus	3	= 0	1	X \$110 =	0	OR	x s =		
	Application Size Fee (37 CFR 1.16(s))								T			
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))								OR			
							TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE		
		(Column 1)		(Column 2)	(Column 3)							
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16())		Minus		:	1	x \$ =		OR	x \$ =		
N	Independent (37 CFR 1.16(h))		Minus	***		1	x \$ =		OR	x \$ =		
딦	Application Size Fee (37 CFR 1.16(s))					]			]			
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					1			OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** 16	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For "N THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For "N THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For "(Total or Independent) is the highest number found in the appropriate box in column 1.											

his collection of information is equated by 37 CFR. 116. The information is required to obtain or retain a based by the public within it to life (and by the USTTO to process) an application. Confidentiality is governed by 30 US of 22 and 37 CFR. 114. This collection is estimated to the bit 2 minutes to complete, according patherapy, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the CERT information Officer. U.S. Pathent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandris, VA 2213-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Pathents, P.O. Box 1450, Alexandris, VA 22313-1450.